

The Guilford Center Consumer and Family Advisory Committee (CFAC)

Annual Report from Committee for 2005-2006

The Guilford Center Consumer and Family Advisory Committee (CFAC) met monthly during FY 2005-2006, except July and December. A detailed description of CFAC activities has been outlined in the four quarterly implementation reports previously submitted to the State.

Highlights of the year included the following:

- Two CFAC members graduated from The Guilford Center's first class of Peer Support Specialists. This 70-hour training was delivered by META Services.
- Participated in the Request for Proposal (RFP) processes for selection of new contract providers. This involved serving on the initial groups to develop criteria for services, reviewing and evaluating contract proposals, interviews with contractors and final selection of providers who received the contracts.
CFAC representatives participated on the following RFP processes:
 - MAJORS (adjudicated youth involved with illicit substances)
 - Deaf and Hard of Hearing
 - Supported Employment for At-Risk Youth
 - Substance Abuse Prevention
 - Substance Abuse Treatment
 - DD Vocational
 - Multi-Systemic Therapy
- Participated in Guilford Center committees including:
 - Quality Council
 - Client Rights
- Reviewed and approved changes to The Guilford Center's Divestiture Plan.
- Presented information on CFAC activities to meetings of The Guilford Center's Community Partners.
- CFAC members met with The Guilford Center's Deputy Director in October about several important items including:
 - a. Director's Goals for 2005-2006
 - b. Development of a peer specialist program within the Guilford Center
 - c. Flexible funding pilot site
 - d. Electronic authorization and claims processing
- The Guilford Center's Deputy Director gave a presentation to CFAC in February, sharing information and gathering feedback on several topics including:
 - Regionalization of UM and after-hours STR
 - Revisions to the divestiture plan

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CFAC members voted to support staffs' efforts toward The Guilford Center becoming a Lead LME and to support The Guilford Center's responsible divestiture of services. There was also a decision made to write a letter to the Secretary of Health and Human Services expressing CFAC members' concerns over divestiture, which was completed and sent in April.

- Staff of The Guilford Center provided information to and solicited input from CFAC about the restructuring of adult mental health services around the Recovery Model, including the peer specialist program, as well as about Integrated Dual Disorders Treatment (IDDT).
- Participated in a planning grant with MHA-G and others to publish a gap and asset inventory and report.
- Two CFAC members graduated from a Train-the-Trainer workshop for Peer Support Specialists.
- The CFAC published a Letter to the Editor of the *Greensboro News and Record* pointing out The Guilford Center's success in implementing mental health reform.
- Reviewed and approved the budget proposal prepared by The Guilford Center to send to the County Commissioners for final approval.
- Developed, with Guilford Center Budget Manager, the CFAC budget for FY 2006-2007. The total budget of \$35,028 includes funds for dependent care, transportation, meals, training, staff support, supplies and other needs. It also includes costs for further development of the Consumer Section of The Guilford Center website.

Again this year the County Budget Office will issue a separate CFAC cost code, which will allow the group to track expenses more effectively. A CFAC member serves as Finance Coordinator for the committee.

- Attended a number of statewide training events including the following:
 - MHA-Greensboro Annual Conference
 - Suicide and Self-Mutilation
 - Housing Summit 2006
 - Building Bridges, Changing Lives
 - Medicare Prescription Drug Benefits
- Held a series of membership training sessions, including training in Integrated Dual Diagnosis Treatment (IDDT) and on the Recovery Model.
- Received/reviewed quarterly reports which detail activities of The Guilford Center toward implementation of mental health reform:
 - Quarterly Implementation Report which goes to the State each quarter to report on progress toward implementation of Local Business Plan.
 - Quarterly Report required by Session Law 2001-437 to be presented to Division Secretary, County Commissioners, Board, CFAC.
 - Quality Improvement Department Quarterly Report.
- Continued work with The Guilford Center's Public Information Specialist on the Consumer Section of Guilford Center Web site.
- Established a Nominating Committee to develop recommendations for a slate of officers for 2006-2007. Voted in June to approve the slate of officers.

The Guilford Center CFAC Goals for Fiscal Year 2006-2007

The Guilford Center CFAC has established the following goals for FY 2006-2007:

- Establish a Legislative Subcommittee with representation from the three disability areas.
- Implement activities to increase consumer and community awareness of the role of the CFAC and to solicit further consumer and family involvement. Examples include:
 - Continued participation in development of the Consumer Corner section on The Guilford Center Web site.
 - Development and distribution of a CFAC brochure.
 - Production of a newsletter insert about the Guilford CFAC, including information about how to get involved, which will be distributed through newsletters of the Mental Health Associations of Greensboro and High Point, the ARCs of Greensboro and High Point, the Guilford County NAMI and other consumer organizations. The first was published during Fiscal Year 2004-2005.
 - Efforts to obtain local media coverage for CFAC activities.
- Continue series of presentations to educate CFAC members on Best Practices, Quality Monitoring and understanding different disability areas.
- Develop activities to solicit consumer, family and community input to identify needs or gaps in services and programs (including support services such as transportation, housing, supported employment, etc.).
- Work with The Guilford Center staff to develop strategies and activities to increase awareness of available services and programs and to make sure people know how to access these.

Needs/Gaps Identified by CFAC

The Guilford Center CFAC has identified several gaps in services which they recommend the State address. The CFAC recommends that the following areas be improved or expanded, either by necessary policy changes, allocation of additional funding or adding staff resources:

- Maintenance of and increased funding is needed for Medicaid and Medicare.
- Personalized treatment programs are needed that include adequate time for stabilization prior to discharge.
- More affordable and accessible housing options are needed for people with disabilities.
- More supports are needed to maintain housing for people with disabilities, e.g., peer support, chore services, other supports.
- More transportation services are needed for people with disabilities.
- Services and assistance need to be available to help those individuals who are transitioning from government assistance to independent living (when they lose their benefits).
- More services are needed for people who have hearing impairment and also have a mental illness or developmental disability.
- Further work is needed on diverting mentally ill persons (both children and adults) who are sent to jails or other correctional facilities to the appropriate treatment facilities which can meet their needs.
- Additional beds for long-term treatment are needed for people with disabilities.
- More independent living options as well as group homes are needed for adult consumers.
- Group homes are needed for higher functioning consumers as well as more seriously disabled consumers.
- Funding is needed for early identification and intervention for children with problems, to provide help before their situations get more serious.
- Services are needed to educate parents to recognize when their children are having problems and to seek appropriate treatment for these problems.
- There is a need to promote cooperation between the school system and mental health in dealing with children with problems.
- Respite services are needed for children with mental illness. These providers need to be trained specifically to work with children with mental illness.
- Adequate funding is needed to implement the programs listed above, as well as other services and programs identified in the State Plan.